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	İ	CLAII		S FILED - PART I			SMALL ENTITY						_
	TOTAL CLAIMS			Column 1)	(Column 2)		TYF	E C		□ OR		OTHER THAN SMALL ENTIT	
	FOR			·			R	ATE	FEE	7	RATE		_
				UMBER FILED	MUMBER EX	TRA	BASIC FE		150.00		BASICF	_	-
	TOTAL CHARGEABLE CLAIMS			minus 20=	•		X\$ 25=			OR		-	_
	INDEPENDENT CLAIMS MULTIPLE DEPENDENT CLAIM PR			minus 3 =	•		X1	00=		1	 -	+-	_
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1	* If the differ	ence in column	1 is less t	ess than zero, enter "0" in column 2		2	+180=			OR	+360=		
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· K:	Ne en tor la cata	u Circono a				١,	180=		lon	√36 0)=		
· 6	If the entry in column, I is known than the entry in column 2, enter 10° in column 2. If the "Tightest Number Previously Paid For IN THIS SPACE is less than 20, and or 70. The "Highest Number Previously Paid For INTHIS SPACE is less than 3, enter 3. ADDIT.								7	د د جامد رسيمون	TAL		
n	6 *Highest Numb	or Previously Paid	d For (Total or	IS SPACE is less that Independent) is the	kn 3, enter "3."	200 احدیدان	OTT. FEE	خىسىت د داداد	JOR A	nọa.			
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